

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
082666-000100US



In re Application of Jin-Kuo Ho, et al.

Application Number 09/388,265

Filed September 1, 1999

For OHMIC CONTACT TO SEMICONDUCTOR DEVICES AND
METHOD OF MANUFACTURING THE SAME

Group Art Unit
2811

Examiner
H. Vu

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$
- ☐ Two months (37 CFR 1.17(a)(2)) \$
- ☒ Three months (37 CFR 1.17(a)(3)) \$920
- ☐ Four months (37 CFR 1.17(a)(4)) \$
- ☐ Five months (37 CFR 1.17(a)(5)) \$

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is:

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

X The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☐ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

4/2/02
Date

Kevin T. LeMond
Signature

09/10/2002 HDEWES61 00000095 201430 09388265

02 FEB 17

920.00 CH

Kevin T. LeMond, Reg. No. 35,933

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.